01/31/2010 20:39

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FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

_		For Other Than An Authorized Committee						Office Use Only			
1.	NAME OF COMMITTEE (in full)			MAILING LA OR PRINT		Example:If typover the lines	oing, type				
L	CONGRESSIONAL MAJOR	ITY CO	IMMC	TTEE				1 1 1	<u> </u>		
Ш			1 1								
AD	DDRESS (number and street)		2000 NORTH ADAMS STREET								
г	Check if different	#3:	30								
L	than previously reported. (ACC)	L AF	RLING	TON				L ^{VA}		201 –	
2.	FEC IDENTIFICATION NUM	IBER	*		CITY 🛦			STATE	Z	ZIPCODE	A
	C00117721				3. IS THI REPO		NEW (N) OR		AMENDED (A)		
4.	TYPE OF REPORT (Choose One)	(b		port	Feb 20 (N	VI2)	May 20 (M5)		Aug 20 (M8)	No (No Yea	ov 20 (M11) on-Election ar Only)
	(a) Quarterly Reports: April 15 Quarterly Report(C		Du	e On:	Mar 20 (N	VI3)	Jun 20 (M6)		Sep 20 (M9)	De (No Yea	ec 20 (M12) on-Election ar Only)
					Apr 20 (N	Л4)	Jul 20 (M7)		Oct 20 (M10)	Jar	n 31 (YE)
		Q1)	(c)	12-Day		Primary (12P)	Gene	eral (12G)	Ru	inoff (12R)
	Quarterly Report(Q October 15	2)		PRE-Elect Report for		Convention	on (12C)	Spec	ial (12G)		
	Quarterly Report(Q January 31 Quarterly Report(Y)	YE)	(d)		Election on			•		in the	
	July 31 Mid-Year Report(Non-election Year Only) (MY)			30-Day		General (30G)	Rund	off (30R)	State of Sp	ecial (30S)
	Termination Report (TER)			Report for	the:						
					Election on					in the State of	
5.	Covering Period 0 7	7	0 1	200	9	throug	jh 12	3 1	2009		
	ertify that I have examined this Foreign on Print Name of Treasurer		and to		my knowled	ge and belief i	it is true, correct	and compl	ete.		
·yμ	of the traine of treasurer	_									
Sig	nature of Treasurer Electron	nically	Filed I	by William	ı Le			Date	01 31	20	10
NO	TE : Submission of false, error	neous,	or inc	omplete info	rmation may	/ subject the p	erson signing th	nis Report to	o the penalties	of 2 U.S.C	437g.
	Office Use								I	FORM 3	3X

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